

CLAIMS ONLY								Application Number <div style="font-size: 1.2em; font-weight: bold;">10647130</div>		Filing Date			
								Applicant(s)					
								* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT								
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
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Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
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Total Indep	4					
Total Depend	5					
Total Claims	9					

May be used for additional claims or amendments						
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